

Operation Greyhound

Adoption Application

Name(s) E-Mail

Work Phone Cell Home

Home address City State Zip
Include city & zip code

Name of relative or friend NOT living with you Contact Phone

How many adults in household? Children Ages

Dwelling type House Apartment / condo / townhouse / duplex Mobile home

Ownership Own Rent Military housing

If renting, please give the name and phone number or e-mail address of the property manager.

Mgr Name Phone or E-Mail

How long at your present address? Do you plan on moving in the near future? Yes No

If you move, what will you do with your pet?

Do you have a fenced yard? Yes No What type fence?

Height of fence at lowest level.

Who will be responsible for the care of your greyhound? Does anyone have allergies to dogs? Yes No

What pets do you currently have?

Type of animal	Age	Sex	Spayed/Neutered	Where kept?	Where does it sleep?
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If you pets are dogs, what temperament are they? Friendly Playful Aggressive Shy
 Protective

Your veterinarian: Name Phone

Have you ever relinquished an animal to a shelter? Yes No

What were the circumstances?

What are the reasons you want to adopt a greyhound?

Main Reason

Other Reasons Watch dog Hunter House pet Companion for children

Companion for another dog Gift To Whom?

Greyhound Preferred Male Female Either Young Adult Senior

Temperament Active Easygoing Playful Affectionate Shy

Where will the greyhound be during the day?

How many hours will the greyhound be left alone? Number of days of the week

Where will the greyhound sleep at night?

What outside shelter will you provide for the greyhound?

How will you keep your greyhound confined to your property? and Do you have a pool? Yes No

In house Kennel Fenced yard On chain On patio With training

Do you consent to a home visit and safety inspection of your property? Yes No

When can you adopt?

If you must give up the greyhound, do you agree to return it to Operation Greyhound? Yes No

I / We certify that all the information above is true and correct

Signature Printed Name Date

Signature Printed Name Date

Proceed to Adoption Agreement form prior to submitting Application